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DEWIPAT No. 30.034.10.US
UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM

Application Number	09/735,989	
Filing Date	December 13, 2000	
First Named Inventor	Johan H. Geerke	
Title	Dosage Forms Having a Barrier Layer to Laser Ablation	
Art Unit	1615	
Confirmation Number	5705	
Examiner Name	James M. Spear	
Total Number of Pages Submitted	Attorney Docket Number	ARC2940R1

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APR 06 2004

OFFICE OF PETITIONS

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52/1.53 <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition to Revive Abandoned Application <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Petition <input checked="" type="checkbox"/> Power of Attorney, Associate, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Acknowledgement Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Continued Examination <u>Remarks:</u>
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm/Individual	Adenike A. Adewuya
Signature	<i>Adenike Adewuya</i>
Date	3/30/2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Adenike A. Adewuya		
Signature	<i>Adenike Adewuya</i>	Date	3/30/2004

SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

FEE TRANSMITTAL

APR 02 2004
for FY 2004

Application Number	09/735,989
Filing Date	December 13, 2000
First Named Inventor	Johan H. Geerke
Title	Dosage Forms Having a Barrier Layer to Laser Ablation
Art Unit	1615
Examiner Name	5705
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☐ Applicant claims small entity status.

 Total Amount of Payment \$ **2145**

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

 Deposit Account Number: **10-0750**

 Deposit Account Name: **Johnson & Johnson**

The Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) authorized below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) \$

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	- 20** =	x	=
Independent Claims	5 - 3(or 4)** =	1 x	45 =
Multiple Dependent			

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Large Entity | Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1001	18	2001	9	Claims in excess of 20
1002	86	2002	45	Independent claims in excess of 3
1003	290	2003	145	Multiple dependent claims, if not paid
1004	86	2004	43	**Reissue independent claims over original patent
1005	18	2005	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$
45

** or number previously paid, if greater; For reissues, see above.

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or coversheet	
1053	130	2053	130	Non-English specification	
1812	2520	1812	2520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1480	2254	740	Extension for reply within fourth month	
1255	2010	2255	1005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1510	1451	1510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1330	2453	665	Petition to revive - unintentional	
1501	1330	2501	665	Utility issue fee (or reissue)	1330
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Statement	
8021	40	8021	40	Recording each patent assignment per property (times number of prop.)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.29(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.29(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	770
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$
2100

Submitted By (Name)	Adenike A. Adewuya	PTO Registration No.	42,254	Telephone	281-477-3450
Signature	<i>Adenike Adewuya</i>	Date	3/30/2004		